Fill	in this information to identify your	casa.				
Dec	otor 1 Shamar Da	IVIG				
	otor 2					
Unit	ted States Bankruptcy Court for th	ne: EASTERN DISTRICT	OF PENNSYLVANIA	<u> </u>		
	ee number <u>22-12470</u>		-			
Of	fficial Form 106l				MM / DD/ Y	· ·
	chedule I: Your Inc	come			IVIIVI / DD/ 1	12/1:
supp spot	<u> </u>	u are married and not fili our spouse is not filing w i. On the top of any additi	ng jointly, and your s ith you, do not include	spouse is l de informa	iving with you, incl tion about your sp	ude information about your
1.	Fill in your employment information.		Debtor 1		Debtor 2	2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional	Employment status			⊠ Empl □ Not e	oyed mployed
	employers.	Occupation	Social Worker		Resider	ntial Mental Health
	Include part-time, seasonal, or self-employed work.	Employer's name	School District of	Phila	Horizon	
	Occupation may include student or homemaker, if it applies.	• •	Golieci Biotilet ei		120 S. :	30th Street Iphia, PA 19104
						•
		How long employed to	nere?			2 years
unle:	mate monthly income as of the oss you are separated.	date you file this form. If you				pace. Include your non-filing spous
more	o oparos, attasir a coparate criset.				For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$ 5,776.32	\$3,923.28_
3.	Estimate and list monthly ove	rtime pay.		3. +9	\$	+\$ 0.00
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$5,776.32	\$3,923.28

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Shamar David	_	Case	number (if known)	22-124	170	
				For	Debtor 1		ebtor 2 or iling spouse	
	Col	py line 4 here	4.	\$	5,776.32	\$	3,923.28	
5.	Lis	t all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,196.04	\$	885.24	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	78.46	
	5c.	Voluntary contributions for retirement plans	5c.	\$	519.86	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	141.34	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	0.00	
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,715.90	\$	1,105.04	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,060.42	\$	2,818.24	
8.	<b>Lis</b> 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8b.	\$	0.00	\$	0.00	
		settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	. ,	8d.	\$_	0.00	\$	0.00	
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8e. 8f.	\$ \$	0.00	\$ \$	0.00	
	8g.	Pension or retirement income	_ 8g.	\$_	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	4	4,060.42 + \$_	2,81	8.24 = \$	6,878.66
11.	Incl oth Do	te all other regular contributions to the expenses that you list in Schedule lude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify:	depen			•	hedule J. 11. +\$	0.00
12.	Wri	d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certainlies			•		· —	6,878.66
13.	Do	you expect an increase or decrease within the year after you file this form No.	?				Combine monthly	
		Yes. Explain: Debtor is an independent contractor, her hours are s	ubiec	t to va	ırv.			
	_		, - <b>-</b>		,			

Official Form 106l Schedule I: Your Income page 2

	n this information to identify your case:				
Debt			Cho	ck if this is:	
	Onamar Bavia		$\boxtimes$	An amended filing	
Debt (Spo	use, if filing)			A supplement show expenses as of the	ving postpetition chapter 13 following date:
Unite	ed States Bankruptcy Court for the: EASTERN DISTRICT OF PENN	NSYLVANIA		MM / DD / YYYY	
Case	e number 22-12470				
1	nown)				
		<u>'</u>			
	ficial Form 106J				
	chedule J: Your Expenses as complete and accurate as possible. If two married people	are filing together, bo	th are equ	ally responsible fo	12/15 or supplying correct
info	rmation. If more space is needed, attach another sheet to this nown). Answer every question.				
Part					
1.	Is this a joint case?  ⊠ No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	<ul><li>No</li><li>Yes. Debtor 2 must file Official Form 106J-2, <i>Expens</i></li></ul>	ses for Separate Housel	hold of Deb	otor 2.	
2.	Do you have dependents? No				
	Do not list Debtor 1 and Debtor 2. Sill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the dependents names.	Daughter		32	□ No ⊠ Yes
	dependence numee.	Grandson		13	□ No □ Yes
				2	□ No □ Yes
		Granddaughter			□No
		Granddaughter		_ 1	⊠ Yes □ No
3.	Do your expenses include No	Granddaughter		8 months	⊠ Yes
0.	expenses of people other than Yes yourself and your dependents?				
	<u>.                                    </u>				
	2: Estimate Your Ongoing Monthly Expenses mate your expenses as of your bankruptcy filing date unless	s you are using this fo	rm as a si	upplement in a Ch	apter 13 case to report
exp	enses as of a date after the bankruptcy is filed. If this is a su licable date.				
		o if you know the			
valu	ude expenses paid for with non-cash government assistance of such assistance and have included it on <i>Schedule I:</i> Yo				
(Ott	icial Form 106l.)			Your exp	enses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgage		\$	1,359.00
	If not included in line 4:				
	4a. Real estate taxes		4a. S	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b. S		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		150.00
_	4d. Homeowner's association or condominium dues	L	4d. \$	\$	
5.	Additional mortgage payments for your residence, such as	nome equity loans	5. \$	<u> </u>	0.00
6.	Utilities: 6a. Electricity, heat, natural gas		60 (	•	380.00
	6b. Water, sewer, garbage collection		6a. \$ 6b. \$		100.00

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	Case number (if known)	22-12470
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	
6d. Other. Specify: cable, internet	6d. \$	220.00
Food and housekeeping supplies	7. \$	890.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	ο Φ	285.00
Personal care products and services	10. \$	100.00
Medical and dental expenses	11. \$	275.00
Transportation. Include gas, maintenance, bus or train fare.		
Do not include car payments.	12. \$	320.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	120.00
Charitable contributions and religious donations	14. \$	0.00
Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance		0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance		320.00
15d. Other insurance. Specify:	15d. \$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify: income taxes-2nd job	16. \$	200.00
Installment or lease payments:	4- •	0.00
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2		0.00
17c. Other. Specify: husband's car payment		688.98
17d. Other. Specify: husband's car payment	17d. \$	583.80
Your payments of alimony, maintenance, and support that you did not report		0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106 Other payments you make to support others who do not live with you.		0.00
	\$ 19.	0.00
Specify:Other real property expenses not included in lines 4 or 5 of this form or on So		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance		0.00
·	204 ¢	0.00
20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues		0.00
Others Connifer	20e. \$	0.00
Other: Specify:	21. +\$	0.00
Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	6,341.78
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2 \$	_
the state of the s	\$	6,341.78
	'	5,511.75
22c. Add line 22a and 22b. The result is your monthly expenses.		
22c. Add line 22a and 22b. The result is your monthly expenses.  Calculate your monthly net income.		
<ul> <li>22c. Add line 22a and 22b. The result is your monthly expenses.</li> <li>Calculate your monthly net income.</li> <li>23a. Copy line 12 (your combined monthly income) from Schedule I.</li> </ul>	23a. \$	6,878.66
22c. Add line 22a and 22b. The result is your monthly expenses.  Calculate your monthly net income.	23a. \$ 23b\$	6,878.66 6,341.78
<ul> <li>22c. Add line 22a and 22b. The result is your monthly expenses.</li> <li>Calculate your monthly net income.</li> <li>23a. Copy line 12 (your combined monthly income) from Schedule I.</li> <li>23b. Copy your monthly expenses from line 22c above.</li> </ul>	· —	
<ul> <li>22c. Add line 22a and 22b. The result is your monthly expenses.</li> <li>Calculate your monthly net income.</li> <li>23a. Copy line 12 (your combined monthly income) from Schedule I.</li> <li>23b. Copy your monthly expenses from line 22c above.</li> <li>23c. Subtract your monthly expenses from your monthly income.</li> </ul>	23b\$	6,341.78
<ul> <li>22c. Add line 22a and 22b. The result is your monthly expenses.</li> <li>Calculate your monthly net income.</li> <li>23a. Copy line 12 (your combined monthly income) from Schedule I.</li> <li>23b. Copy your monthly expenses from line 22c above.</li> </ul>	· —	
<ul> <li>22c. Add line 22a and 22b. The result is your monthly expenses.</li> <li>Calculate your monthly net income.</li> <li>23a. Copy line 12 (your combined monthly income) from Schedule I.</li> <li>23b. Copy your monthly expenses from line 22c above.</li> <li>23c. Subtract your monthly expenses from your monthly income.</li> </ul>	23b\$	6,341.78 536.88